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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

9. [] 37 CFR 3.73(b) Statement (when there is an assignee)

020232

Total Pages

First Named Inventor or Application Identifier

Hitoshi TAKAYANAGI, Takashi ITO and Katsuyuki OGURA

[XX] Power of Attorney

Check Box, if applicable [] Duplicate

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APPLICATION ELEMENTS FOR:

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IMAGE DEVELOPMENT		Washington, D.C. 20231
[XX] Fee Transmittal Form (Incorporal (Submit an original and a duplic)		•
21-[XX] Specification	Total Pag	es [63]
3 Drawing(s) (35 USC 113)	Total Sheets	
[XX] Oath or Declaration	Total Pages [3]
a. [XX] Newly executed (original)		
b. [] Copy from prior application (3 (for continuation/divisional with Box i. [] Deletion of Inventor(s) Signed statement attached delete see 37 CFR 1.63(d)(2) and 1.33	17 completed).	ned in prior application,
5. [] Incorporation by reference (useable The entire disclosure of the prior	application, fr	hecked) om which a copy of the oath or declaration is supplied under sure of the accompanying application and is hereby
6. [] Microfiche Computer Program (Ap	ppendix)	
7. [] Nucleotide and/or Amino Acid Sec	quence Submis	sion (if applicable, all necessary)
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8. [XX] Assignment Papers (cover sheet Please publish the assignee d		(s)) to: Dainippon Ink and Chemicals, Inc., Tokyo, Japan opplication.

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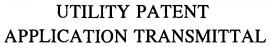
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PAGE 2 OF 3

10. [] English translation Document (if appli	cable)				
11. [XX] Information Disclosure Statement	[XX] Copies	of IDS Citations (PTO-1	449 & 6 Ref.)	
12. [] Preliminary Amendment					
13. [XX] Return Receipt Postcard (MPEP 503)					
14. [] Small Entity Status is claimed.					
15 [XX] Claim for Convention Priority [] Certified copy(ies) of Priority Document(s)					
a. Priority of <u>Japanese</u> Application No. <u>2001-056636</u> filed on <u>March 1, 2001</u> is claimed under 35 USC 119.					
16 [] Other					
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:					
[] [] Continuation [] Division [] Continuation-in-part (CIP) of prior application no/					
FEE TRANSMITTAL	Number Filed	Number Extra	Rate	Basic Fee	
The filing fee is calculated below				\$740.00	
Total Claims	11 - 20		x \$18.00		
Independent Claims	1 - 3		x \$84.00		
Multiple Dependent Claims \$280.00			\$280.00		
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	PAGE 3 OF 3			
[XX] A check in the amount of \$780.00 is enclosed to cover the filing fee of \$740.00 and the assignment recordation fee of \$40.00.				
[] Please charge our Deposit Account No. 01-2340 in the total amount of to cover the filing fee and the assignment recordation fee. A duplicate of this sheet is attached.				
[XX] The Commissioner is hereby authorized to charge payment for any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Deposit Account No. 01-2340. A duplicate of this sheet is attached. CORRESPONDENCE ADDRESS:				
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Typed or Printed Name Donald W. Hanson	Reg. No. 27,133			
Signature Date: February 26, 2002				

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